LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

Phone: (208) 334-2852 Fax: (208) 334-2282

To Be Filed By:

L-3

LOBBYISTS (Sec. 67-6619)

Page	of	Page(s)
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	·	ermanent busine	ess addres	S			D	ate p	repared		- 07	Period	covered	
James R. Baugh 4477 Emerald #B100											/ month en	iding		
	oise, ID 83							02/01/07				(Mo.)	(Day)	(Yr.)
,										01	31	07		
Item	Totals	of all reportal	nle expen	ditures made o	r incurre	d by Lobb	L vist (or hv	Lobbyist's Empl	over on	behalf o	of Lobb	vist's Emplo	ver
	1		CAPEN	iditales made o					buted by each emp					yci.
Category of Expenditure Reimbursed Personal Living and Travel				*Total Amount for All Employers	Item 3, at bottom of									
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported		All Employers	Employer No. 1			Employer No. 2		Employer No		o. 3	Employer	Employer No. 4		
Enterta Food a	inment nd Refreshme	ent	\$	0.00	\$			\$		\$			\$	
	Accommodat			0.00				-	**************************************	·			Ψ	
Advert				0.00				_						
Travel				0.00		and the state of t		-					18860	
Teleph	one			0.00			_	_		-			-	***************************************
	Expenses or S	ervices		0.00			_	_						
		Total	\$	0.00	\$	0.0	0	\$	0.00	\$		0.00	\$	0.00
								-						
									led a total amoun					on Page 1.
Item 2	Date Date	f each expendi		ore than fifty d	ollars (\$5		gisla nount		hther holder of pu Names of Legis					in Group
	.1			one										
			11	Offic										
	Continued on	attached page(s)												
	Continued on							em	Fr	nnlover(s) Name(s	and A	idress(es)	
		INST	RUCTI	ONS		}		3	<u> </u>		, , , , , , , , , , , , , , , , , , , ,			
			ny lobby	ist registered u	nder Sec	tion	No.	1	o-Ad Inc 177 Emerald #	B100,	Boise,	ID 83	3706	
67-	6617 Idaho C	ode											,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		: Monthly re ties of the past		e within ten (10) days	of the	No. 2	2						
ТО	BE FILED V													
Ben Ysursa Secretary of State							No. 3	3						
PO Box 83720							-							
		Boise,	ID 83720	0-0080			No.	4						

Item 4				imployer in the nature of contributions of money or other tangible or intangible official or for or on behalf of any Legislator, Public or Executive Official.						
	Date	Amount	Nar	Name of Legislator. Public or Executive Official Receiving or Benefiting						
Item			on, the number of the Senate		LEGISLATIVE SUE	зјест	IDENTIFICATION			
5		Resolution or other was supporting or op	legislative activity in which posing.	Code	e Subject	Code	Subject			
Subject (from t	Code Bill, R able) Legisla		Appropriation Bill Number and Section Number Medicaid Rules Voc Rehab Rules	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state	17 18 19 20 21 22 23 24 25 26 27 28 29 30	Health service, medicine, drugs and controlled substances, health insurance. hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)			
		ess, financial service	ision, procurement, contract, is or bond lobbyist was		CERTIFICATION: I hereby certificorrect statement in accordance we have a signature					